



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

8/27/14

Carleta Cherry
135 17 Ave SW
Cedar Rapids IA 52404

Dear Charleta,

This letter is in regards to the compliance check of your Level A, Registered Child Development Home completed on 8/21/14. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.4 No more children are in care than the rules for the specific category will allow. **Provider said she will change back to a level B provider to meet this rule.**

As a Level A you are limited to 8 children in care at a time. You had ___9_ children in your care upon my visit, 7 were under school age and 2 school aged children. As a level A you are limited to 6 children under school age.

As a Level B you are limited to 12 children in care at a time. 8 can be under school age if two are tracked for part time care status. (less than 120 hours per month of care)

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.

Has the older cribs no longer allowed in child care. Provider said she will get rid of them and if she takes on any children under age 1 she will use an approved sleep system.

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.

You had medications, poisonous, toxic or otherwise unsafe materials within access of children. These need to be in a location with secured access from children One prescription pill in a prescription bottle with a child safety cap on it, sitting back on the dining room table .

☐ 110.5(1)d Medicines are inaccessible to children.

☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept. **Provider said does when city alarms go off, Need to document doing the drills**

☐ 110.5(2)c An individual file is maintained for each staff assistant and contains: **need for Pumpkin**

☐ 110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396 **need for Pumpkin**

☐ 110.5(2)c A completed Request for Child Abuse Information, form 470-0643 **need for Pumpkin**

☐ 110.5(2)c A physician's signed statement of health and immunization status at the time of employment and at least every two years thereafter. **need for Pumpkin**

☐ 110.5(2)c Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years. **need for Pumpkin**

☐ 110.5(2)d An individual file is maintained for each substitute and contains: **need for Pumpkin (has not used her as a substitute yet just as an assistant when she was ill)**

☐ 110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396. **need for Pumpkin**

☐ 110.5(2)d A completed Request for Child Abuse Information, form 470-0643 **need for Pumpkin**

☐ 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter. **need for Pumpkin**

☐ 110.5(2)d Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years.

☐ 110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. **need for Pumpkin**

For assistance in finding training call CCRR at 866-324-3236 x 1410

Most hospitals and fire departments also offer this training. You may call them directly to find a training session. In addition the American Heart Association and Red Cross also offer this training.

☐ 110.5(8) Children's Files

The children's files must be **updated annually with the emergency medical authorization completed yearly**. If the parent wants to review, edit and resign and date the intake and emergency medical authorization instead of completing a new form that is ok. I suggest you pick a date, such as the first of the year, beginning of school, your birthday or anniversary, Valentine's Day, ect. On that date I suggest you double check for a current physical form and immunizations (if there were any updates) and have the parents redo or resign the emergency medical and intake information. **All but one child's file needed an update and that one will need an update next month.**

☐ 110.5(8) An individual file is maintained for each child and **updated annually or when there are changes**. Each file contains:

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.-- **Needs a yearly update**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency. -- **Needs a yearly update**

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.-- **Needs a yearly update**

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance. **2 children needed this form**

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually. **1 child needed an update.**

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child. - **Needs a yearly update**

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include **times of arrival and departure, destination, and person(s) responsible for the child.** Has a blanket permission slip, but needs to include the bold items . suggest to use the calendar method She agreed to doing so.

☐ 110.8(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A"

☐ 110.8(1)a Not more than six preschool children present at any one time including infants. **Had 7 preschool children plus two school age children upon arrival. Provider will change back to a level B**

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☐ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: 45 days of receipt.

X _____
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6826 if you have any questions regarding this letter.

Sincerely,

Lisa Wesbrook
Social Worker II

Irene Holzwarth
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).